

**OCCUPATIONAL LICENSE INTAKE FORM**

State Form 47367 (R/3-08)

INDIANA GAMING COMMISSION

\*This agency is requesting disclosure of your Social Security Number in accordance with IC 4-1-8-1; disclosure is mandatory and this record cannot be processed without it.

Application date ( <i>month, day, year</i> )		Casino		
Last name		First name	Middle initial	Maiden name
Social Security Number*	Position		Level	Department
Address ( <i>number and street</i> )				
City		State	County	Zip code
Telephone number	Citizenship	Date of birth	City of birth	State of birth
Height	Weight	Sex ( <i>circle one</i> ) Male                      Female		Age
<b>CIRCLE THE CODES THAT APPLY</b>				
<b>HAIR COLOR</b>				
Bald ..... BAL		Black ..... BLK		Blond/Strawberry ..... BLN
Brown ..... BRO		Gray/Part Gray ..... GRY		Red/Auburn ..... RED
Sandy ..... SDY		White ..... WHI		
<b>EYE COLOR</b>				
Black ..... BLK		Blue ..... BLU		Brown..... BRO
Gray ..... GRY		Green ..... GRN		Hazel ..... HAZ
Maroon ..... MAR		Pink ..... PNK		
<b>SKIN TONE</b>				
Albino ..... ALB		Black ..... BLK		Dark ..... DRK
Dark Brown ... DBR		Fair ..... FAR		Light ..... LGT
Light Brown ... LBR		Medium ..... MED		Medium Brown ..... MBR
Olive ..... OLV		Ruddy ..... RUD		Sallow ..... SAL
Yellow ..... YEL				
<b>RACE</b>				
White ..... W		Black ..... B		Asian/Pacific Isl ..... A
Am. Indian/Alaskan ... I		Multi-Racial ..... M		Hispanic ..... H
<b>INDIANA GAMING COMMISSION USE ONLY BELOW THIS LINE</b>				
Proof of Identification <input type="checkbox"/>	Occlic Date entry complete <input type="checkbox"/>		Application Scanned and Saved on S: Drive <input type="checkbox"/>	
Proof of Age <input type="checkbox"/>	Fingerprints taken <input type="checkbox"/>		Email Application to Investigations <input type="checkbox"/>	
Application complete and legible <input type="checkbox"/>	Photograph taken <input type="checkbox"/>			
Interview complete <input type="checkbox"/>	Badge printed <input type="checkbox"/> <i>*unless felony conviction</i>			
Agent Received by _____		Identification number _____		